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"The agitation of thought is the beginning of Truth."

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AMERICAN JOURNAL OF HOMŒOPATHY.

NEW YORK, JUNE, 1848.

PRIZE ESSAY,

BY DR. G. M. SCOTT OF GLASGOW.

The prize committee of the Parisian Homœopathic Society awarded a gold medal, valued at 300 francs to Dr. Scott for the following essay. The committee justly say of it: "It is short, clear, but not dazzling in style." Dr. S. whilst discussing the fundamental idea of homœopathy has displayed to view, parts that no anatomist of thought had remarked before himself; he has not cast in a new mould, in a new form, thoughts enunciated by Hahnemann or others, on the value of homœopathy; he has done better, he has hit upon ideas of a perfectly novel character; he has *invented*.

A Logical and Experimental Demonstration that it is by Homœopathy alone that the principles and machinery of the science and art

of medicine have attained a definite foundation.

It is proposed in the following disquisition:

I. To explain what is understood by a definite foundation for the principles and machinery of the science and art of medicine.

II. To show that no such definite foundation has been attained by any school previous to that of Hahnemann.

III. To show that a definite foundation has been attained by that school.

The relevancy of the arguments adduced will constitute the demonstration *logical*;—the *historical* character of the investigation will constitute it *experimental*; and thus will the terms of the proposition be met.

We assume the truth of the homœopathic law, because to do otherwise would lead to a repetition of arguments and instances familiar to homœopaths and others, and would carry us too far away from the point directly in view. Our position, then, is, "Granting the truth of the homœopathic law, a definite foundation is laid for the theory and practice of medicine." In this we make no unfair assumption, inasmuch as in our review of other systems we adopt the same premises, though we draw an opposite conclusion, viz. "Granting the truth of the theory no definite foundation is laid."

I. What is meant by a definite foundation for the principles and machinery of the science and art of medicine? It is necessary to limit the subject to the consideration of *therapeutics*, since an investigation of the collateral sciences of physiology and pathology would imply too extensive a range of inquiry, and would be foreign to the end contemplated. Our question therefore resolves itself into this, "What is meant by a definite

foundation for therapeutics in theory and practice?"—Now this, we conceive, must consist in the establishment of a *universal law of cure*, which shall be the foundation of *theory*, and of a correct method of *applying* the law, which shall be the foundation of the practice.

The perfection of such a foundation would be, that the law, which is the foundation of theory, should also itself be the foundation of the practice.

In order to this, it must be of such a nature that the practice shall arise out of the theory without the intervention of any separate theory. For example: the practice of homœopathy arises directly from the theory, because, if the theory, "*similia similibus curantur*" be established, we require no independent theory of the action of medicinal substances, but only an accurate investigation of their actual, discoverable properties; whereas, on the contrary, a therapeutical theory founded on a pathological hypothesis (however correct it might be), would require that medicines be selected according to their agreement with that hypothesis: thus, if fever be ascribed to a spasm of the extreme vessels, and if this doctrine be regarded as our guide in practice, we must select a medicine in virtue of its property of counteracting such spasm; which is to introduce another theory, viz. that of the action of each individual medicine; and in strict accordance with the original theory of disease, all results of the medicine are to be discarded, excepting so far as they may be considered anti-spasmodic.—In this view, no theory of disease can constitute a definite foundation for practice.—But if some universal law of cure be pointed out, consisting in a relation between the actually ostensible properties of medicinal substances and the equally ostensible or discoverable phenomena of disease, this, we think, will constitute a definite foundation both for the theory and practice of medicine. But this, as far as we know, has not even been *sought* by any other school than that of Hahnemann, and hence has arisen the want of progress and of a definite foundation, notwithstanding the immense expenditure of learning, talent and effort bestowed on the subject during many centuries.

With the single exception of the Empirics, the method of cure in every school was made to depend on the *theory of disease*, not on the discovered properties of medicines, apart

from such theory. It is the characteristic of homœopathy, that it is not a *theory of disease* at all, but a *theory of cure*, and that it may be applied to practice, whatever theory of disease may happen to be adopted. It provides therefore, if established, a definite foundation for the theory and practice of medicine, because the universal law of cure which it points out as the foundation of the theory is capable of immediate application to practice, without any separate or independent theory.

II. We propose now, by a very succinct review of the principal theories of medicine from the age of Hippocrates, to show that no definite foundation for theory and practice has ever been laid, except by the school of Hahnemann.

We are not aware that Hippocrates himself ever asserted any general law or theory; he commonly contented himself with details of individual cases and the treatment which he considered suitable, though it is manifest from the habitual strain of his writings that his practice was founded on his physiological and pathological theories; that is to say, he selected medicines in virtue of their supposed relation to the supposed deviation from the normal condition implied in any given disease; and the relation is that of contrast, expressed by the words "*contraria contrariis curantur*." We cannot recall any passage of his writings containing the express statement of a general law more definite than this, nor do we imagine that even *this* was assigned by him as a definite foundation for practice, but merely as an intimation of the general end to be kept in view; for in *one* passage at least, he recognizes the direct opposite, in saying, "*vomitus vomitu curatur*." But, were it even the case that he had laid down the principle "*contraria contrariis curatur*," as a fundamental law, he should still have failed in laying a definite foundation for the theory and practice of medicine. For, in the first place, it is manifest from the whole tenor of his writings that the state which he opposes is the abnormal state in which he conceives the disease to consist; that is, it is his own pathological theory, and not the symptoms actually discoverable; and secondly, were it otherwise, and were the law of cure expressed by these words "*contraria contrariis curantur*," it would still be impossible to apply it without an intervening theory; we must ascertain what state is contrary to a given morbid state, and what medicine can

establish such a contrary condition: what state, for instance, is contrary to head ache, to measles, to cynanche, &c.; for if the *contrary* to such states be merely the absence of the morbid symptoms, the rule is a mere truism, and amounts to this, "Cure each disease by that which removes it;" if more be intended, then the rule is an enigma requiring a distinct theory for every disease and for every medicine. The merit of Hippocrates, no doubt, was great; but it consisted in patient observation and faithful delineations of diseases, their course, their treatment, and their issue; and in the general design to reduce them within the province of philosophical investigations. His merit may be compared to that of Bacon, not indeed in pointing out a general rule even for the routine of inquiry but in accumulating facts from which by induction a general law might be derived, rather than to that of Newton, who indicated the one universal law which explained an infinite number of facts. Hippocrates may thus be regarded as contributing to lay a definite foundation by furnishing materials to those who should reduce the details of experience to a general law, but he cannot be regarded as having elicited any such law himself. The only sense in which we can conceive that the most devoted admirer of Hippocrates would assert that he had laid a definite foundation for the theory and practice of medicine is, that he may be regarded as the founder of what has been called the dogmatic or rational school as distinguished from the empiric; which amounts to this, that he looked upon physiology and pathology as the guides to practice. But even if it be allowed that the law which is to constitute the definite foundation is to be found somewhere in the region of these collateral branches of science, it cannot certainly be shown that he succeeded in extricating it, or in reducing it to any formula: for, while by universal consent, he is styled the father of medicine, and has in all ages been held in the highest veneration, there is, nevertheless, no one law that bears his name, professing to afford a definite foundation.

If our remarks be correct, we conceive that they apply to all that may be called the Hippocratic or dogmatic school, whether we view it as speculating on the forms of ultimate atoms, or as seeking light in an improved anatomy, or as analyzing and combining substances in crucibles, instead of bringing them

into relation with the human frame; though we should grant that the efforts of the various sections of this school were exerted in the right direction, we maintain that hitherto they have been unsuccessful, and that no law can be pointed out as a definite foundation for the theory and practice of medicine laid by the dogmatic school.

If we now turn to the empirics, we shall find them equally destitute of any general law; indeed, their principles forbid it; for as long as experience alone is allowed to guide, that school can be regarded merely as accumulating instances from which perhaps a general law may be derived by *others*, but to make this deduction *themselves* would be to contradict the essential principles of the sect; for, as soon as a general law or theory is advanced, the characteristic feature of the school is lost. The empirics, indeed, approached the nearest to the establishment of a definite foundation, because they pointed out that method which is really the best guide to practice, though they did not indicate the *law* which reduces to unity all the details of experience, and which thus should constitute a guide not only through the beaten paths of human suffering, but also through the *terra incognita* of each new malady.

For example: On the invasion of a new disease, as the cholera in Europe, the dogmatist and the empiric would be alike at fault; the former, to be consistent, must defer his treatment till he has formed a satisfactory theory of the pathological character of the disease; the latter refers to his experience, and finds it a blank; while the homœopathist, whose guide is in the very features of the disease itself as cognizable by him, is competent to meet it at once (we do not here say *successfully*, but at least *consistently* with his principle) without the delay of forming an hypothesis. He feels that a definite foundation has been laid for the treatment of this disease as well as the more familiar, and therefore he may undertake it at once without any conscious shifting of his ground.

Themison the founder of the methodic school, renounced the pursuit of the "*prima causa morbi*," but he adopted a system which amounted to very nearly the same thing. For while he classified all diseases under three heads, according to some supposed common feature, viz.—1st Diseases of confinement,
2d. Diseases of relaxation,
3d. Diseases of a mixed charac-

ter,—he must have founded this very classification on a *theory* of confinement and relaxation, unless we consider these elements of classification in the most obvious and superficial point of view, in which case, assuredly no definite foundation would have been laid. Certainly the guide would be very far from satisfactory which should give no further rule for treatment of catarrh than that which applied to diarrhœa, or direct us to cure hæmorrhoidal flux by a remedy which he happened to have found useful in diabetes. But the real views of the methodic school were much more recondite than to include only the most obvious indications of confinement and relaxation; they regarded disease as consisting in a disproportion of the pores of the body to the atomic particles appropriated to them, and by this disproportion occasioning confinement and relaxation. This, therefore, was to introduce a very abstruse theory in the cause of disease, instead of discarding such theories altogether. And it was to leave us still in the dark as to the means of cure, the means of re-adjusting the proportion; and since medicines were supposed to act in virtue of their power of so doing, this was to meet a theory of disease by a theory of medicinal action; that is to say, instead of laying one definite foundation, to lay two very indefinite and very uncertain foundations. We may adopt this or any other classification of diseases, to assist the memory, but what we seek is a principle of *cure* which shall be independent of all classification.

Take now the Episynthetic school, whose principle was that of combination, adopting the characteristic features of different sects, combining, for example, the theories of the dogmatic or Hippocratic with the results of the empiric and the classification of the methodic. This is certainly to lay no definite foundation, but rather to incur the risk of introducing the elements of weakness and inconsistency, and of making facts bend to theories. The rigid Empiric who turned a deaf ear to all theory was more likely to be firmly established than the Episynthetic who, gathering together on one side a mass of facts, and, on the other, placing a readily formed theory, determined to make one the measure of the other, to the rejection of neither. If we regard the synthesis of this school merely as involving the adoption of the *characteristic principles* of other schools, thus acknowledging that pathological theories ought to be

formed and ought to guide our practice, but that these theories must be modified and built upon experience, and that for convenience sake, these numerous details must be thrown into method, the Episynthetic resolves itself into the Eclectic school, whose principle was to select from all schools that which they contained true and worthy of imitation, in which, no doubt, they are to be commended; but nevertheless, they came short of laying a definite foundation, since it is from such a source, such a collection of truths, of true theories, and established facts, that a general law may perhaps ultimately be elicited, but they cannot themselves *constitute any* such general law. To select truths from all quarters is no doubt to accumulate a number of truths; but we are in quest of *one truth*, one uniform, unbroken foundation, and this we can find neither among the Episynthetics nor Eclectics.

The Pneumatic school took one step further in departure from a definite foundation; for, whereas hitherto, the theories of disease had contemplated deviation from the normal standard in the several known elements of the body or their properties, heat, cold, dryness, and moisture, the pneumatic sect introduced another element, entitled *pneuma* or spirit, to which they assigned the cause of disease, thus building a theory on a basis itself having only theoretical existence. These were the principal medical schools of antiquity. To them the Arabians cannot be said to have added much, since these were merely the copyists and translators of their predecessors, though they introduced some new substances into practice. They do not appear to have founded any new school, unless we ascribe to them the chemical school. The introduction of chemistry, even in its very imperfect state, was a great step in advance, but merely a step of *detail*, that is to say, it contributed to enlarge the materia medica, but it established no general law of cure. Even the search after a universal medicine was of this character; it was the search after a *particular substance*, not after a *law or principle*. The pursuit was so visionary, that it deserves not any particular attention; but even if by a stretch of the imagination we suppose the object attained, it could scarcely be said to lay a *foundation* for the theory and practice of medicine, since it would *wholly absorb* both the science and the art. A universal remedy of disease and preventive of death would itself constitute the

whole of therapeutics. But apart from the chimerical nature of the pursuit, it involved such an ignorance of the nature of man and the laws of his being as to be totally incapable of affording a definite foundation for any method of correcting deviations from the healthy performance of functions appropriate to that nature and regulated by those laws.

We are left equally destitute of any definite foundation by the more recent theories either spiritual or material. Thus the spiritual theories of Van Helmont and De Stahl may be held to be true or otherwise;—we may contemplate vitality under the idea of a living intelligent principle or soul, or we may regard it as the necessary result of organization, and at the same time be conscious that we are equally removed on either supposition from any definite foundation of the theory and practice of medicine. Though we were quite sure of the existence of an intelligent *vis nature* presiding over the human frame and seeking to repel disease, we should still be without a guide to the treatment of it; we cannot regulate the movements of this intelligent principle, nor force it to speak out in order to regulate ours: all that we can do is to minister to the exercise of its powers, but whether our efforts be to help or to hinder, we can tell only by the *result*, a result in no degree modified by the hypothesis of such a superintending power. And if, on the contrary, we view life as the necessary result of organization, and every disease as a perturbation of that organization, we have still to ascertain the character of the perturbation and the method and principle according to which we may seek to restore the pristine or normal state. Either theory, whether that of spirituality or materialism, affords in itself no clue to treatment; it is a mere theory of physiology or pathology, not a theory of *cure*.

We need not dwell long on any of the more recent doctrines of the schools; there are however two, which may not be wholly passed over. The theory of Dr. Brown, owing to its great simplicity, was very widely adopted. It may be considered a new school of the methodic sect, classifying all diseases under two heads, viz.—1st, excess of excitement, and 2d, defect of excitement; and classifying treatment and medicines accordingly. But this also is a theory of *disease*, not a theory of *cure*, and involves a double theory, viz.: that of the disease and that of the action of the medicines, with this additional inconvenience,

that in proportion as it simplifies the forms of disease, so must it simplify the available powers of medicine, and regard them not, as they really are, infinitely varied, but merely as possessing one or other of the two properties of *exciting* or *allaying excitement*. To esteem so narrow a conception of the *materia medica* and of the morbid conditions of human nature as a definite foundation for the treatment of the countless forms of disease, would be to construct a pyramid upon its apex.

Similar in its essential character, viz., that of very extensive generalization appears to be the theory of Broussais, which ascribed a large proportion of diseases, if not in principle the whole, to mucous irritation, and met them by the simple remedy of blood-letting. (We do not assert this to be the sum total of his theory or treatment, but its characteristic feature, that which *individualized* it). Now, supposing the theory established in its full extent, that all diseases have a local origin and fixed character, consisting of irritation of the mucous membrane, this would be merely a theory of disease, not a theory of *cure*; and it would by no means follow from it, that the method of cure should be equally uniform and fixed; for it remains to be shown that the abstraction of blood is the cure for mucous irritation, and still further, that this cure can be effected by the abstraction of blood at so remote a distance as that which intervenes between the external surface of the body and the internal organs. Flattering, therefore, as the prospect of great simplicity may have been, even at the cost of so much vital powers as is implied in making the abstraction of blood the chief therapeutical agent, it cannot be maintained that even at this cost, a definite foundation has been laid.

It is somewhat indicative of the insufficiency of the various systems which we have thus very briefly reviewed, that they arose in general from each other, not by way of *development*, but of *opposition*. Thus the Dogmatic by its uncertainty led to the Empiric, the Empiric, by its want of classification, to the Methodic; the incompetency of any one of the preceding systems led to the Episyntetic and Eclectic; while the more recent schools may be considered merely as modifications of the earlier, chiefly of the pathological and methodical.

These changes, therefore, although extending through centuries by no means indicate

an advancement in medicine, but rather its low and uncertain state. Had a definite foundation been laid, we should expect the different theories of successive ages to arise from each other by way of development, for they are not destitute of *mutual relation*, nor are the characteristic features of all incapable of mutual harmony. Thus, pathology is related to empirism, empirism to method or classification, method to combination and selection. Had the foundation, therefore, been laid, all these forms might actually have existed, but they would have presented themselves under the aspect of *development*, not of opposition. Had it been laid in pathology, a link would have been established between that science and therapeutics; and classification, combination, and selection would have been also regulated by the same law, whatever it might be. But the difficulty has always been to establish the link between pathology and therapeutics: efforts directed to this end have hitherto proved fruitless, and it is probable they will always remain so. The proper object of pursuit, is a general law of *therapeutics*, the discovery of which must be made in the *region* of therapeutics, that is to say, in the application of medicinal agents to the human constitution. Until we have distinct convictions concerning the source whence we are to derive the object of our search, we may be laboring in a mine rich in its appropriate ore, but utterly destitute of that which we desire.

III. But has a definite foundation been laid by Homœopathy? We think it has: for a foundation for both theory and practice has been laid, if a true principle have been taught, and so eliminated as to be applied to practice; if a universal law of cure have been established which is of such a nature that the practice shall arise from the theory, and be itself dictated by the terms of the theoretic law. And this we conceive to be characteristic of Homœopathy; for the law "*similia similibus curantur*" which is the theoretic law, points immediately to those properties in a medicine which render it suitable to any given disease. No intervening theory of medicinal action is requisite; we do not inquire whether a medicine be anti-spasmodic, or relaxant, or stimulant: we inquire merely what are its obvious effects, and how far do they resemble the discoverable symptoms of the malady; so that in proportion as our knowledge of the *materia medica* is complete, will the disease itself af-

ford an index of its own cure. A law more perfect, and consequently a foundation more definite than this, we cannot conceive, though the application of it may require, as it undoubtedly does, careful observation; but the law having been enunciated, nothing more is necessary than a faithful and diligent investigation of its details in the operation of various medicinal substances; every new disease successfully treated in accordance with the principle, is cement added to the foundation, every new medicine adequately proved is a new stone in the superstructure.

That a foundation has been laid, may be inferred with some degree of confidence from the fact, that every well marked step of advancement in the ordinary method of practice, implies the adoption of one or other of the great characteristic features of Homœopathy. We do not say that they have been *borrowed* consciously or unconsciously from Homœopathy, though in some instances this may have been the case; the strength of our argument, however is rather confirmed than otherwise by regarding all such coincidences as perfectly independent, as the results arrived at by different minds working on the same subject, in different ways and with different preconceptions.

Now if we compare the present state of therapeutics, with its former state, we shall find the prominent differences to be: 1st. A greater simplicity in prescription, approaching the Homœopathic rule of administering only one medicine at a time; 2d. A diminution in the quantity of medicine administered; 3d. A more general treatment of diseases as of constitutional character; 4th. In a few instances, the adoption of specifics if not *nominaly*, at least *virtually*, the same medicine being employed in similar form of disease, as mercury in syphilis and in certain derangements of the bilious secretions, cinchona in ague, &c.; 5th. These specifics, or some of them at least, have manifestly, and on all hands allowed, a certain amount of Homœopathic character—the mercurial action being with difficulty distinguished from the syphilitic; 6th. Some eminent lecturers on the *materia medica* have recommended the investigation of the properties of medicinal substances by experiments on the healthy rather than on the sick.

While this gradual and general adoption of the grand principles of Homœopathy by physicians of every school affords a striking cor-

roboration of their truth, and the more satisfactory in proportion as it is supposed to be the result of independent reflection in experience; the difference in the relative position which these characteristic principles hold in respect to Homœopathy, from that which they hold in respect to any other system, warrants our claiming for the former the merit of laying the foundation: for these principles in *their mutual relations* have been seized by Homœopaths, while by others they have been casually adopted, but without regard to their mutual relations. By the Homœopathist they have been shown so to arise from each other as, *when united*, to form a solid basis for theory and practice; by others, they have been severally adopted or rejected, but without that bond of union, that perception that one involves the other, which constitutes the cement, without which the foundation cannot be secure, and which affords the rule of measurement, without which it cannot be well defined.

It has been observed that at all periods of history, the state of medicine has reflected the philosophical movement of the particular epoch. In accordance with this remark, which we believe to be correct, it may be interesting to notice the general features of those philosophical movements which characterize the present age; by which we understand, not entirely or principally, the prevalent bent of the mind among the public generally, and intellectual men in particular, but also, and chiefly, the character of those laws of nature which recent researches have elicited. The general bent of the human mind in the nineteenth century is towards an exclusive appreciation of *facts*. No theory is much valued unless established by *facts*, and no theory is considered too startling for credence, if *facts* can be adduced in its support. Ideas which had grown obsolete, because uncongenial to the public mind, rather than because they had been proved to be inconsistent with reason, have revived and in many instances been adopted, and the sole demand is that it should be supported by *facts*. The *prima facie* condemnation which formerly greeted them is exchanged for a demand for *facts*. This is evinced (though partially) in the treatment given to recent revivals of mesmerism and of the transmutation of metals. Though the old spirit of prejudice has no doubt been allowed to exert an undue influence, yet we can hardly contemplate the numerous and crowded meetings assembled for

the witnessing of professed experiments, without regarding them as an expression of the public mind saying "give us *facts*," nor can we regard the *sceptical* but still in intention, at least, the *fair* and *equitable* tests advanced by men of science, other than as a similar expression on *their* part.

Theories, no doubt, have been suggested in accordance with the present state of knowledge to explain these departments of science, but the demand is constantly for *facts*, and by these they must stand or fall. Now this exactly coincides with the spirit of Homœopathy and of its founder. There is something startling in the first aspect of the theory and in the details of the practice, but a resolute determination to be guided *only by facts* sustained its founder [through many discouragements and difficulties] to the completion of the method in its present form.

But in the more important feature of the inquiry, viz. the correspondence of the characteristics of Homœopathy with the characteristics of those laws of nature which recent researches have elicited the analogy is equally striking. These characteristics are—1st. A tendency towards the abolition of materialism, and of the supposed intervention of any physical or corporeal medium between the powers of the agent and the thing acted upon; in other words the resolution of all the phenomena of the material world into the results of *powers* rather than of material atoms or substances; corresponding to what is understood by the dynamisation of medicines, *i. e.* the eliciting of their characteristic virtues with as little as possible of brute matter; or indeed, as some have supposed, the imparting of their powers to the medium through which they are conveyed, in a manner somewhat analogous to the communication of magnetic power to any number of needles by contact with a single magnet.

2d. The effecting of great results by agents in themselves inappreciable—by the scientific application of natural laws previously known to a greater or less extent, but only recently developed in practice. Such are the effects of the electric telegraph, the electric clock and other applications of this single power of nature, perhaps the most subtle and recondite of all; a power which universally pervading creation, may, nevertheless, lie dormant and undiscovered, till called into action by mere friction, the simplest of all mechanical efforts, and which when elicited, affords scope for the

ingenuity of the most imaginative and the researches of the most laborious. To this agrees the employment of medicine in infinitesimal quantities.

3d. The recent application of chemistry to agriculture, which consists in a revelation of the *principles* which have all along, though perhaps unconsciously, been *practically* enforced, leads to a more accurate adaptation of the remedy to the defect (for this is the essential character of all manure); in other words, a more specific treatment of the necessities of the earth; and, in consequence, a much smaller expenditure of the material.

Finally: the tendency of all philosophical investigations is towards unity. In proportion as electricity, galvanism, gravitation, and even vitality, become known, they seem to converge to one common point. The ultimate principles of the material world are by chemical researches continually diminishing, and are, by some, supposed to be resolvable into one, whose various modes of combination give rise to the countless forms under which the material world presents itself. Unity is the demand of every thinking mind; unity is the goal to which every science tends; unity in principle, with vast variety in application, is the characteristic of Homœopathy: unity embracing, we conceive, not merely the limited questions of diseased humanity, but *every* question of an analogous nature, the maladies of the mind, the defects of the character, and the evils of man's social position.

The agreement, therefore, of the characteristic features of Homœopathy with those of recent scientific discoveries, or improved applications of known laws, which are seen to render more and more firm and defined the foundation of the various departments of science to which they belong, corroborates the assertion, that in the department to which it is especially applicable, it acts the same part. Recent scientific developments and applications render progress an absolute certainty, as truly as the planting of a living seed in a congenial soil is a prophetic act, to be fulfilled in due time by the growth of the corresponding herb; and the laying of the foundation of medical treatment in the great therapeutic law of Homœopathy will, we doubt not, be followed in time, though perhaps slowly, by a firm and well cemented superstructure. But it must not be forgotten, that to lay a foundation is not *itself* to raise a superstructure; the foundation may be perfect—the superstructure utterly

worthless; the foundation may be the work of a master—the superstructure the work of many unqualified workmen.

When we consider the actual state and results of Homœopathy as exhibited by statistical accounts, we are looking at the superstructure which *may be marred and must be modified* by each individual engaged in its construction; when we are studying the doctrines of Hahnemann, we are examining the foundation. He arranged and cemented and formed in one solid basis, the scattered and disjointed materials, which though in many instances known before his time, and actually in the hands of less skilful workmen, had remained incapable of supporting any superstructure, from the want of the guiding and uniting principle of a master mind.

The use of the word machinery in the terms of the proposition, seem to imply that the details of practice as well as the general principle, are contemplated, and we conceive that even in this point of view the position holds true. For, as we know, Homœopathy is the only system which has included the mode of preparation and the administration of medicines, the proportion of the dose and the method of investigating their properties, as part of the general system. In Homœopathy these details arise naturally from the very principle which is the basis of the whole. The connection between the law of cure and experiments on the healthy is not arbitrary or accidental the method of experimenting arises of necessity from the law, from which also it follows that the medicines must be kept perfectly distinct and administered singly; and from the same law it follows that the quantity of medicine administered in disease should be small, while the curative process depending on the reaction of the vital power, it follows that a considerable interval should elapse before the repetition of a medicine. These general rules of practice arise naturally from the essential principles of the theory, though it is impossible that any theory should assign exact limitations in particulars, which must be modified by the state of each individual patient, and the character of each individual disease.

The sum of our remarks amounts to the following propositions:

1. That no theory of disease can ever lay a definite foundation for practice.
2. That a theory of cure can alone do this.
3. That until Hahnemann, the labors of

physicians were directed principally towards the establishment of a theory of disease, and that this is characteristic of medical schools generally, even at the present day.

4. That the principle of Homœopathy, "*Similia similibus curantur*," is theory of cure and not of disease.

5. That from this principle of the science of medicine arise naturally the general principles of the practice of medicine; and therefore,

6. It is by Homœopathy alone that the principles and machinery of the science and art of medicine have attained a definite foundation.

CASES TREATED WITH HIGH POTENCIES.

BY DR. GROSS.

(Continued.)

"'Tis above reason,' cried the doctor on one side. 'Tis below reason,' cried the others. 'Tis faith,' cried one. 'Tis a fiddlestick,' said the other. 'Tis possible' cried one. 'Tis impossible,' said the other."—TRISTAN SHANDY.

F., a maid servant, of nineteen years of age, was attacked with acute rheumatism going from one joint to another, with redness, swelling, and impossibility of moving the affected joint. The slightest touch or motion occasioned the most exquisite pain. On the 28th July I gave *Cocc.* (300) one gl., in three tablespoonfuls of water, one to be taken every four hours. On the 29th, great improvement had taken place. On the 30th, the knees and right elbow were free from pain, but the left elbow was still painful. On the 31st, the left arm was quite well, but pain had returned during the night in the right knee, which, however, again went off by eight in the morning. On the 1st of August she had no pain any where; could use her hands, and even knit. In consequence of a chill about a week subsequently she had a relapse, for which I again employed *Cocc.* (300) in the same manner, and on the following day all traces of the rheumatism were gone.

The wife of a clergyman who had had several easy labors, but had two years before had a difficult delivery, where it was necessary to use instruments, and a laceration of the perineum was the result, was near the term of gestation. While going about her domestic duties two days before, the membranes had

burst, and the liquor amnii escaped. The attendant midwife found very little dilatation of the os uteri, and was of opinion that, as there was a complete absence of labour pains, the delivery would be greatly retarded. On being consulted, I gave a globule of *Secale corn.* (200,) to be dissolved in three tablespoonfuls of water, and one taken every hour. I was informed next day, that there was no time to give all the medicine, for immediately after the first dose powerful pains come on, and a strong female child was born feet foremost. I have seen the same results in several instances.

L., A peasant woman of strong constitution, about fifty years old, was suddenly attacked with a most severe erysipelas of the face. The whole countenance was swollen and frightfully disfigured, the eyes closed up; there was an exudation of acrid fluid, and the forehead was particularly red, and yielded much exudation. I dissolved one gl. of *Rhus* (200) in water, and ordered a spoonful to be given every hour. The following day the swelling had fallen, the eyes were opened, and scabs formed especially on the forehead; the third day the scabs had increased, and I repeated the *Rhus* (200); the fourth day the scabs began to fall off; the fifth day I repeated the *Rhus* in solution; the sixth day the face was pretty smooth and very slightly red; on the seventh she exposed herself, against my orders to the open air, when the weather was very bad, but fortunately, without any bad effect. She was perfectly well.

Burgomaster K. had suffered periodically for many years from pressure and great uneasiness in the pit of the stomach. He had, at the same time, boring and shooting in the back, from one part to another, at one time more, at another less violent; sometimes behind, sometimes in front, so severe that he thought he would die, especially when in bed, where he could find no relief to his tortures in any position. This was followed by vomiting of his food, then of mucus, which was so sour as to set his teeth on edge, and thus the paroxysm ended. Nothing relieved him but external warmth, and that only for an instant. After such an attack some days passed over without any pain. The day previous to an attack there was always great irritability of temper, and at night the attack invariably came on. I prescribed a solution of one gl. of *Ars.* (900), a spoonful to be taken every

morning, an hour before breakfast. After the first dose the attack came on the same night, and recurred every following night with such severity that he declared, on the fourth day, he would take no more of the medicine, and sent to me for further advice. He was now only free from pain in the forenoon, every afternoon the attack came on, preceded by dyspnoea, then pain, as from fulness and constriction in the pit of the stomach, and as if thrusts of knives along the short ribs through the chest to the spine. I advised him to await patiently the issue without more medicine, and shortly afterwards the paroxysm ceased and never returned.

Postmaster S., about seventy years of age, had been accustomed to have his bowels opened by using Morrison's pills. He had used them for years, and entertained a high opinion of them. All at once, however, they failed to produce the desired effect, and the more he took the more uncomfortable he became. He called in his ordinary medical attendant, who sought to afford him relief by giving him Cream of Tartar and Carbonate of Potash, and applying leeches to the abdomen, but without any good effect. After eight days (the 20th of May), I was consulted, and found the following state:—Burning and excessive sensitiveness of the abdomen; frequent convulsive contractions of the abdomen, with pain whilst awake. After each evacuation of the bowels, which consisted of merely a spoonful of mucus, and to which he had very frequent calls, there was violent burning in the rectum. The clyster pipe, on being introduced, touches a painful place, and the fluid injected slowly passes off again immediately. If injected suddenly or forcibly, it causes much pain in the gut, and remains there, and only a little mucus is discharged. I gave *Arsen.* (400) one gl. Thereafter the convulsive movements came once again, with less pain, and the patient could now sneeze without discomfort. On the 23d, I found the abdomen quite free from pain; a hæmorrhoid had appeared at the anus, which caused burning pain. The evacuations were very thin; much inclination to sleep; great weakness; coldness of the body. The patient was very wayward, and put all around him to great discomfort. One globule of *Chamomilla* (300) removed this abnormal affection in a few hours. I then gave a globule of *Vernum* (200). On the 25th, the general state

was much improved; he had an extraordinary desire for beer, sour milk, and sugar-water, which I allowed him to gratify. He felt comfortable in the warm air out of doors, and was out for a short time in a garden chair. The extremities were only occasionally cold. The sleep was short; evacuations thin, whitish yellow, and could only be passed in a standing posture. He complained of pain in the back; had fixed ideas of a troublesome character, about which he wept. He got *Causticum* (400) one gl. On the 27th, the bowels were moved without difficulty in the sitting posture; the motions consisted of only white and yellow mucus; during the evacuation great pain in the loins. He could only pass his urine after the bowels had been moved, and then with such excessive pain as compelled him to scream. The urine was limpid; restless nights, with great excitability; lachrymose humor. I gave a globule of *Puls.* 300. On the 29th he was much better; he could almost walk alone. The motions consisted of yellow, thin faeces, without mucus, and he had several daily. No medicine. On the 3d of June he was quite well.—*British Journal of Homoeopathy.*

CASE OF OBSTINATE AND FATAL CONSTIPATION.

Baltimore, May 19, 1848.

Doctor Kirby.—In the last number of your Journal you gave, with some remarks, Dr Parker's report of the progress and treatment of the case of Dr. Washington, which terminated fatally, and it reminded me of the report of a case, by Dr. W. R. H. of our city, the attending physicians, called a case of obstinate and fatal constipation, recorded in the *Boston Medical and Surgical Journal*, Nov. 3, 1847.—as follows:

Sir,—I take the liberty of sending you an account of a case, the most remarkable that has ever occurred in my practice; and if you deem it of any interest to your readers you are at liberty to publish it in the Journal. The case is obstinate and fatal constipation, from insidious inflammation.

The patient was a married lady of our city, in middle life, and between four and five months advanced in pregnancy. I was called to the case some two or three days after she was taken down with symptoms of what she and her friends called colic—similar attacks of which she had had frequently before, and they commenced treating her with laudanum in the usual way, but without any effect.

When I saw her there was no tenderness

over the epigastrium upon pressure, and no fever, she simply had violent pain over the region of colon and stomach, attended with considerable flatulence, which would entirely disappear for a while and then return again. In a word, the case seemed to be one of *flatulent colic*. And as such, a solution of half a drachm of bi-carb. soda, with fifty drops of laudanum, was administered, to be followed with a full dose of oil, having the same amount of laudanum, provided the pain returned.

There was ease for two or three hours, when the pain returned, and the oil and laudanum were given, but rejected. Cal. and pulv. Dov. aa gr. x. were given, with some relief for a short time. This was followed by another dose of oil, which was again rejected. The pain returning and the stomach irritable, the following prescription was ordered:—R. S. mur. hydrarg., gr. xij; pulv. opii gr. ij. M. Ft. pil. iv. One to be taken every two hours, with laudanum, gtt. xi., between the pills, if they should prove insufficient to quiet him. The pills and laudanum were all taken, with but partial relief. The stomach being somewhat irritable, a dose of magnesia, to be repeated was ordered, to move the bowels. This was all rejected.

I now discovered, for the first time, and this was on the evening of the second day of my attendance, that there was some tenderness over the abdomen, on pressure—and some fever, though not very great. Thinking there might be some degree of inflammation present, and that it was not impossible for colic and inflammation to be combined, I determined to draw blood, and took about two ounces, and then had a large blister applied over the region of the stomach and bowels. She was left with an anodyne for the night.

Saw her next morning. No better. Had vomitings in the night, and the pain continuing all the time, though still returning at times with greater violence.

Being anxious that the bowels should be opened, all anodynes were stopped and senna and salts were administered in repeated doses, four in number without effect—two of which, however, were rejected.

Evening.—Stomach continues sick, and now rejects almost everything taken. There being some thirst, the free use of ice was allowed, and injections ordered. At bed-time visited her, and found that the pain had increased on pressure over the region of the stomach and colon—that there was some restlessness, with a moderate degree of fever. Ordered 24 leeches to be applied upon the abdomen, and followed by poultices.

Next morning saw the patient early. Found her no better, but rather worse. Sick stomach through the night, with occasional vomiting. Pain all the time, but still greater at some moments than others. The bowels not moved yet. Ordered the warm bath and injections to be repeated while in the bath, and the following pills of ox-gall and hyoscyamus—five grains of former with two and a half of latter, and croton oil, two drops, made into four pills—to be given alternately every two hours till the bowels were moved.

Mid-day saw patient. No better. Bowels not yet moved. Some of the medicine rejected.

Professor Monkur was now requested to see the case with me. At four o'clock, P. M., we met. The patient no better, and no operation yet.

The doctor advised calomel to be given in large doses. Three powders were ordered; the first of twenty, the second of fifteen, and the third of twenty grains; the first to be followed in two hours with half an ounce of ol. tereb. rubbed up in an emulsion—and so on through the night, till the bowels were moved.

Next morning both sent for to see the patient early. Found her much worse, though she retained the medicine, and took the whole prescribed; which amounted to forty-five grains of calomel and one ounce oil of turpentine—which added to the twenty-two grains previously given made now seventy-six grains of calomel in her system—and yet no motion of the bowels. As there was no time to lose, the doctor thought we might venture on five drops of croton oil at a dose, as he said he had given as high as seven drops with good effect. This was given, injections of turpentine ordered, and the patient visited again at 10 o'clock. Found the medicine had been retained, but bowels not moved. She was now evidently sinking fast. There was great restlessness, tossing from side to side of the bed; not so great, but still complains very much. Ordered mercurial unguent to be rubbed freely over the abdomen, inner side of the thighs, and arm-pits—and directed a dose of oil.

6 o'clock, P. M.—Met, and found there was still no operation, and the patient was evidently *in articulo mortis*. She died about three hours after.

Post-Mortem Examination, 10 o'clock next morning.—Abdomen considerably distended. Colon greatly enlarged by wind, fluid injections, and some feculent matter. No hardened faeces discovered. Next to its size, the most prominent alteration was the high grade of inflammation seen throughout the whole course, and most especially on its left ascending portion, commencing at the caput coli. Here the redness was intense, with incipient patches of mortification at different points. The small intestines showed a considerable amount of redness in different parts of their course, but not in so high a degree as the colon. The colon, in fact, showed that it was the great focus of all the distress, and the cause of death. No hardened and impacted faeces, no intussusception, no strangulation, could be discovered—the inflammation alone seeming to be the cause of all the torpor and want of contractile power shown by the bowels. The distention of the colon by wind or gas may, probably, have had some share in this general paralysis of its muscular apparatus. The stomach was slightly inflamed—also the peritoneum. Liver and spleen looked healthy. Uterus somewhat inflamed—and the right Fallopian tube, with its fimbriated extremity, greatly engorged with venous blood.

Remarks.—It seems evident, at least to our mind, that in the above case there must have

been inflammation of the colon from the very beginning, and that its true character was masked by the symptoms of colic, which were associated with it and predominant at the outset. And this teaches us the important fact, that not only these two diseases can come together, but that an insidious, highly dangerous and fatal inflammation may also be going on at the same time in the system, unsuspected, till the Rubicon has been passed, the citadel of life stormed, and medical skill consequently put at defiance.

Most Respectfully,

W. R. HANDY.

Baltimore Md., Oct. 28. 1847.

You may say what you will, Mr. Editor of the skill of your New York faculty of physic, and of your heroic practitioners of medicine, but I venture to assert that you cannot give a case in the medical annals of your state, which will compare with the above case of "*obstinate and fatal constipation*." Consider it:—The patient was a female, in the most delicate physiological relations of the human systems, "between four and five months advanced in pregnancy; was taken down with symptoms of what *she and her friends called colic* : it had continued three days. When the doctor was called in, treated with laudanum, in the usual way. First dose of her attendant, a 'drachm of Bi-Carb. Sod., with fifty drops of laudanum, followed by a full dose of oil. Next prescription, Calomel and pulv. Doveri aa grs. x., followed by another dose of oil. Next prescription, Calomel grs. x. ij., opii ij., with laudanum, forty drops to be taken between the pills, if pains continued. All were given, relief partial, *no operation from bowels*. Next prescription a dose of magnesia, and repeated : no action upon the bowels but ejected by the mouth. Next prescription, senna and salts in repeated doses, *four in number*, without effect, two of which were ejected. Next prescription, ice ordered, and injections. Next prescription, 24 leeches, followed by poultices. Next prescription, warm bath and injections. *No action on the bowels*. Next prescription, Ox-gall, grs. v., Hyoseyamus, grs. ijs., Croton oil 2 drops, in 4 pills, to be given every two hours till bowels were moved. *No action yet*. Next prescription, in consultation, calomel, three doses, one of twenty grains, one of fifteen grains, one of twenty grains, to be followed in two hours with half an ounce of oil of turpentine, and to be repeated through the night, until bowels were moved. Next morning no motion, although she had taken during the night forty-five grains of calomel, and an ounce of oil of

turpentine, which made in all sixty-seven grains of calomel and no operation. Next prescription, *five drops of Croton oil*, and injections of turpentine, a few hours after, her bowels not being moved, although the medicine was all retained, report says she was sinking fast, great restlessness and tossing, and the next and last prescription, was mercurial frictions to abdomen, thighs and arm-pits, and a dose of castor oil. Eight hours after, there had been no action in the bowels, and the patient died three hours after. When we read the result of the post-mortem examination, and learn that the bowels contained "no hardened feces," to require removal, no intussusception, no strangulation," one would ask, why all this heroism in her treatment. When I was undergoing medical tuition, I well remember how careful my preceptor was to warn me of this difference between colic and enteritis, and have seen many cases to show me the importance of the diagnostics in such cases. I would like to have seen this case of "obstinate constipation" treated homoeopathically, or if that was not practicable, by some experienced nurse. The gentleman who attended the case, are both professors of many years experience, and their decided energy in the case would cause one to exclaim with the old lady who heard of the death of "poor John," "Well, he was to have died, any how, for he was bled seventeen times.

Truly Yours,

F. R. McMANUS.

HOMOEOPATHY MISREPRESENTED.

The *Missouri Medical and Surgical Journal* has an article on homoeopathy, which is about as near a true explanation of that system of medicine, as we usually meet with from those who know little or nothing of the subject.

It has always seemed to us a remarkable fact, that most allopathic physicians do not comprehend *similia similibus curantur*. Almost without an exception whenever they attempt an illustration of that therapeutic law, they confound the cause of a disease and the remedy, and represent them as identical. This is the case with Dr. Coon of the above Journal. He says :

"If we push mercury until *ptyalism* is the result, is it possible that by persevering in the use of mercury you will cure your patient of salivation."

He says also :

"If a person should be poisoned with arsenic, would it be proper to give arsenic in order to neutralize the poison. No. And yet the affirmative of this question is the theory of Hahnemann."

This is either a wilful perversion of the truth, or an instance of gross ignorance of it. The law of cure may be thus expressed; *"that only such remedies are capable of effecting a real and permanent cure as affect the healthy organism in a manner similar to the natural disease."* We do not perceive in this, nor will any one else, except the editor of the *Missouri Journal* and his colleagues, that an arsenical poisoning is to be cured by arsenic; or that a salivation of mercury is to be cured by persevering in the use of that mineral.

We cannot waste our time in a notice of other parts of the article in question, as no benefit could accrue to any one if we did so. The article almost without an exception is made up of misrepresentations, absurdities, and exceedingly illogical reasoning, even were the premises true.

CASE OF FREEMAN, THE MURDERER OF THE VANNESST FAMILY.

B. FOSGATE, M. D., AUBURN, N. Y.

We publish this case not only for its intrinsic interest in an historical and moral point of view, but because it is drawn up with uncommon elegance, and in a medico-legal point of view, affords a most striking illustration of the importance of this science to the welfare of men. It saved, in this instance, by its generous application the life of an unaccountable agent from sacrifice.

"With the exception of a slight admixture of aboriginal blood, he was of African descent.

"At the age of sixteen he was unjustly sentenced to five years' imprisonment in the State Prison at Auburn, for grand larceny. He left his prison conscious of the injustice he had suffered, and had imbibed an idea that he was entitled to pay for his time. This sentiment could not be eradicated from his mind, and on several occasions he applied for warrants against those he supposed liable. Remuneration with him was the *one idea*. Failing in this mode of obtaining redress, he armed himself with a common butcher's knife, and a cane with a blade attached to the lower end, and from his lodging made his way to Owasco Lake, at about sunset on the 12th of March, 1846. After examining two or three premises, he finally selected the residence of Mr. Van Nest as the proper place to begin 'his work,' as he termed it, and there massacred Mr. Van Nest, his wife and one child, aged two years old, and Mrs. Wycoff, aged 70. He stabbed Mr. Vanarsdale in the chest, who subsequently recovered. In the affray he

entered every room in the house, both above and below, but took nothing away. He went to the stable, unfastened and mounted a horse and was some rods from the scene of devastation in the incredibly short space of five minutes from the time of entering the house, as was proved in the evidence. Three days afterward he was committed to Cayuga county jail to await his trial.

"He was tried at a special session of Oyer and Terminer, July 1846—first, as to whether he was sane at the time of trial, and secondly, on the indictment. A verdict of sufficient soundness of mind to be put on trial was rendered on the preliminary issue, and of wilful murder on the indictment. Subsequently, however, a new trial was granted by the Supreme Court. A trial calling forth so much talent in its prosecution, and arousing such fearful excitement among the people, is of rare occurrence.

"On the part of the people, the cause was conducted by Hon. John Van Buren, Attorney General of the State of New York, and for the defence by Hon. William H. Seward, ex-governor of this state.

"My knowledge of the prisoner commenced on the 16th of March, 1846, being the day after his commitment, and it continued until the completion of a post-mortem examination of his body on the 21st of August, 1847.

"During the scene at Van Nest's, he received a severe wound in the articulation of the right thumb with the carpus—the artery barely escaping division. This circumstance saved the lives of other members of the family, because, to use his own expression, he could not 'handle his hand any longer.'

"My services were required on account of this injury. In addition to the wound, I also found him entirely deaf in the left, and partially so in the right ear.

"It was a singular circumstance that he never made an inquiry as to either the extent or condition of the injury, or the time necessary to complete a cure, or the prospect of recovering the use of his hand—though it was the right, and as a laborer his main dependence. Neither did he complain of any sensibility in the wound, although the physical evidences of pain accompanying the inflammatory stage were such as to leave no doubt of its existence. In fact from the time of his commitment until the day of his death, although he often saw, and was attended by me, through his last sickness, he asked only two questions, one about his medicine, the other regarding his diet, and these were made during his last illness.

"During the principal part of his incarceration, he passed his time standing; his body erect his head a little drooping, and with arms folded. He sustained this posture with statue-like stillness—indicating great muscular strength. He exhibited a calm quiet expression of countenance, occasionally broken by a smile, which had the appearance of just bursting into laughter, but would quickly subside, leaving the same unalterable expression as undisturbed as though a gleam of

mirthfulness had never occupied his fancies. To the careless observer, it appeared as though he endeavored to suppress an irresistible propensity to laugh. This smile was never accompanied by any vocal sound, but often glowed upon his features, regardless of time, place, or circumstance, indicative of intense mental emotion. For this emotion he could never assign a cause. I say he never could, because, when asked, he always said he 'didn't know.' My conclusion is also based upon the remarkable fact, that on the trial *seventy-two* witnesses on both sides coincided in the opinion, that the prisoner did not intend to deceive in any reply made to the numerous interrogatories put to him.

"His deafness increased until the sense of hearing was nearly, if not quite obliterated. I doubt whether he heard any conversation for the last two weeks of his life; at all events, I could not get a reply that harmonised with my question.

"On the 12th of April, 1847, I was called to see the patient as being 'not very well.' He had a quick thready pulse—considerable cough, with free expectoration—not much appetite, but rather thirsty. He made no allusion to these symptoms, but directed my attention to his left ear, which discharged pus profusely. From this time forth, the aural discharge continued, accompanied by all the symptoms of tubercular phthisis, until his existence terminated, six days after the chain that bound him to the masonry of his cell had been removed.

"About three weeks previous to his disease, I observed a prominent protrusion of the left eye, and upon further examination there proved to be an entire obliteration of vision. He could not close the lids over it, for they, with all the muscles of that side of the face, were paralysed, and the mouth considerably drawn to the right. The cornea of both organs had much the same appearance. The loss of vision, I am inclined to think, was the result of functional, not organic lesion. The protrusion depended most probably upon the loss of muscular power in its motor apparatus, in common with the muscles of that side of the face. The globe, in *articulo mortis*, recovered in a great measure its natural location, as did the paralysed muscles of the face—a common occurrence of facial distortion from nervous lesion at death.

"Owing to insufficiency of light in the cell, but more particularly to the shattered condition of the patient—being deaf, almost blind, and nearly speechless—no satisfactory account of symptoms or the effect of remedies could be obtained from him."

Here followed some phrenological observations which we omit.

"I have measured his cranium in two ways: First, by passing a string across the frontal and around the spinous process of the occipital bones.

It measured, in the greatest circumference, twenty-one inches. Secondly, after the directions laid down in Combe's Phrenology, by callipers.

	inches.
Viz. from occipital spine to individuality	7 3-8
" occipital spine to ear	4 1-2
" ear to individuality.	4 2-3
" ear to firmness	5 3-16
" destructiveness to destructiveness	5 3-8
" cautiousness to cautiousness	4 7-16
" ideality to ideality.	5 3-8

"On proceeding to a post-mortem examination, the body was found extremely emaciated. The costal and pulmonary pleura, though easily separated, were extensively adhered, and the lungs were an almost entire mass of disease. Tuberculous matter was interspersed with abscesses throughout the whole organ. The pericardium contained about one and a half gills of serum. The heart contained polypi, but had a healthy appearance. Liver natural. Gall bladder distended. Mucous membrane of the stomach slightly inflamed. Intestinal mucous coat healthy. Mesenteric glands tuberculous. Urinary bladder distended. Kidneys natural. The peritoneum appeared healthy, but the sac contained some fluid.

"Upon opening the cranium, the bones were found rather thinner than ordinary, particularly for a colored subject, and the dura mater, was adherent to a portion of the occiput. The anterior portion of this membrane was congested and inflamed, with considerable serum between it and the arachnoid. This latter tunic was somewhat thickened and congested. The anfractuositities of the right hemisphere of the cerebrum were filled with serum. The superficial vessels of the right anterior lobe highly congested on a superior surface. Cerebellum to all appearance healthy.

"The whole brain, separate from the dura-mater, weighed 43 3-4 ounces avoirdupois. Cerebrum 38 ounces. Cerebellum 53-4 ounces.

"On section of the medullary substance, it was found thickly studded with bright red points. The right thalami appeared to have undergone some change, and the whole superior brain was more or less congested. The membrane covering the petrous portion of the left cavity was congested, and the remaining parts of it appeared healthy.

"There was caries of the inner part of the petrous portion of the left temporal bone. The membrana tympani, with the internal structure of the ear, most obliterated. There was a necrosis containing fetid pus, having no perceptible connexion with the external ear.

Remarks.—The important question connected with this subject is, whether the pathological state of the brain, its membranes and the ear, was one of long standing or of recent occurrence? On this point rests the physical evidence of the prisoner's accountability. If by possibility it could be determined that the organ of mental manifestation was without disease when the crime was perpetrated, then depravity unparalleled must be assigned as the only cause; and if so, the disease of the organ at his decease could not be held in extenuation of his crimes.

"That the diseased condition of the brain was of long standing, appears to be unquestionable from the fact, that the mental organ could not sustain so great a lesion as the autopsy presented, without the mind having exhibited sudden and violent derangement, as well as other symptoms which accompany its acute diseases. This, however was not the case. He never complained of, or exhibited the ordinary symptoms in such instances, nor even gave evidence of any mental change whatever; but, on the contrary, presented the same characteristics throughout. During his last sickness, there was not a single symptom indicating acute inflammation of the brain, and yet, on examination after death, there were abundant and unequivocal evidence of inflammatory action there.

"The disease of the ear also was chronic, and dated its commencement some months previous to the commission of the crime. On his trial it was proved in evidence that about two years previous, when an inmate of the state prison—he was struck on the head with a board, the blow splitting the weapon into fragments. He attributed his deafness to this cause, or, to give his own description, 'it knocked his words down his throat—his ears dropped down—his kernels (meaning the tonsils) dropped.' Now, the infliction of this blow upon a thin skull, associated with his own account of its effects, would lead us to conclude that the concussion seriously injured the auditory apparatus. It possibly burst the tympanum, and if so, it opened a communication between the external ear and the fauces, which induced the remark that "it knocked his words down his throat," &c. Is it not a just conclusion, that from this injury the diseased action was set up which ultimately involved the whole brain?

"Whether the facial paralysis was the result of cerebral congestion, or whether it was owing to a diseased state of the nerves of motion in connexion with the condition of the ossa petrosa, may be questionable, because the nerves, as they passed the brain, were apparently healthy; but the right hemisphere of the brain being the most deeply implicated in the organic derangement, the paralysis would appear, as it did in this case, in the muscles of the opposite side.

"It should not be forgotten, that the deceased had passed through scenes of blood seldom equalled, where but a single individual was the aggressor; that he had been surrounded by the wild fury of an enraged populace for hours, that he had been chained and for a portion of the time bedded upon the stone floor of a dimly lighted cell, for almost eighteen months; suffering the jeers and grimaces of inhuman and uncourteous spectators; wasting by a slow process of consumption; sustaining the blight of one physical energy after another; with little compassion and less than ordinary attention; and through the whole period, having scarcely asked a question regarding either friend or foe, soliciting no favor, showing no hatred, exhibiting no remorse, entering no complaint, and through all, sustaining an undisturbed tranquillity.

"From this concatenation of circumstances, this unruffled, equable, almost idiotic state of mind, that no external relation could disturb, or internal influence alter, we can scarcely come to any other conclusion by pathological reasoning, than that the state of mind which he exhibited subsequent to his arrest, depended on a chronic derangement of the mental organs, and must have existed antecedent to the crime itself. If such a combination of pathological facts, and all the other circumstances attending the prisoner from his arrest to his death, do not establish an unsound state of mind, they at least present one of the most extraordinary cases furnished by the annals of our race. Such a case demands the careful consideration of the philosopher and jurist.

"How much the cause of justice and philosophy is indebted to the unwearied perseverance of the eminent advocate who withstood the tide of popular indignation in conducting the prisoner's defence, is left for other hands to register; but true it is, that over prejudice and ignorance, science has gloriously triumphed.—*Am. Journal of Medical Sciences.*

A CASE TREATED AT THE NEW YORK HOMŒOPATHIC DISPENSARY.

By H. HULL CATOR, M. D.

One of the Attending Physicians.

Mrs. T. æt. 34 years, a widow, was admitted into the Dispensary about the first of March, 1848.

Two weeks previously, she was attacked with a severe cough, attended with acute pains all through the chest. Great oppression of the chest. Respiration anxious, stertorous and wheezing. The oppression of the chest and difficulty in breathing, were mitigated when the pain in the chest was the most intense and *vice versa*. Breathing short and difficult.

Cough aggravated by a recumbent posture, and at night, could not remain in bed, was compelled to assume an erect position. Sensation as of excoriation in the throat, chest and pit of the stomach, especially when coughing. Sensation of coldness in the chest. Coldness of the hands and feet. Debility. Loss of appetite.

Arsenicum alb. 30th one dose.

On the 3rd of March returned to the dispensary and reported herself no better. The cough was now very severe and dry, which continued all night so violent as to keep her awake. Cough worse on lying down, and ameliorated in the open air. When coughing, pain in the head, stomach and abdomen. Dartings as if from knives in the chest. Palpitation of the heart, &c.

Sulph. 30th one dose.

March 4th. Felt some relief from the last remedy. Coughed much less last night.

No medicine.

March 6th. Was requested to visit her at her residence. Found her much worse. Her case now presented an alarming appearance, all her symptoms violent. Complained of severe throbbing pains all through the head, with darting pains, could bear neither light nor noise, great difficulty of breathing, wheezing respiration; sensibility and swelling of the larynx. Pulsation in the neck; could not bear the least pressure upon it, which produced a sensation of suffocation, also by throwing back the head. Violent palpitation of the heart. Great prostration, almost to syncope. Could not raise her head from the pillow. Asthmatic breathing and constant disposition to cough. No appetite. Bowels confined.

Lacheses 30 one dose.

March 12th. Found her entirely relieved. Symptoms all gone; appetite returned; strength very much increased; was sitting up and at work. Discharged her.

I may here remark, that I have had several opportunities of conversing with this lady, since her illness, and on each occasion she expressed her deep felt gratitude, for so unexpected and speedy recovery. She regarded her case incurable and so expressed herself at my first visit, and, now says, she is indebted to Homœopathy for her life. She has had no return of the disease up to this time, it now being nearly three months.

DEATH OF DR. GROSS.

We regret to have to announce the death of Dr. Gustav Wilhelm Gross, who breathed his last at Juterbogk, in Prussia, which had for so many years been the scene of his labors, on the 18th of September last.

Dr. Gross was one of Hahnemann's earliest disciples, and from his earliest adoption of Homœopathy up to his death, we find him actively engaged in the work of disseminating a knowledge of the new system, at one time furnishing practical and theoretical papers to the *Archiv*, and editing that journal in conjunction with Stapf, now engaged in the translation of his master's works into Latin, and again, occupied with the editorship of the *Allgemeine Homœopathische Zeitung*, in conjunction with Rummel and Hartmann, besides publishing divers small works, and being perpetually occupied in the proving of new medicines, some of the most valuable of which we owe entirely to him, and most of those given us by Hahnemann being enriched by experiments on himself and others. Nor has his career been unmarked by deviations from Hahnemann's beaten track. Accordingly, we first find him practically opposing Hahnemann's precepts and giving larger doses than usual; again we find him incurring Hahnemann's severe censure for his isopathic views. And after Hahnemann's death he immediately broached his extraordinary views on dynamization and the high dilutions, an account of which we have given in our last volume.

Whatever may be the opinion entertained of Dr. Gross's novel views and therapeutic eccentricities, none will deny him the character of indefatigable industry and untiring zeal in advancing the new system, nor is it possible to doubt the sincerity of his convictions nor his earnestness of purpose, and hereafter, when the sifting hand of time shall have winnowed the good seed from the chaff, the name of Gross will be regarded and respected as that of one of the stoutest champions of our faith—as that of one of the largest contributors to our remedial treasury. —*Brit. Jour. Hom.*

We know nothing of Dr. Gross but from his writings. From what we have learned of him in this way, we doubt if the above notice does him the justice he merits. Ought he to be regarded as holding "therapeutic eccentricities" because he at one time employed in his practice "larger doses than usual"; and at another, attenuated medicines beyond the standard of Hahnemann; and that he applied the term *Isopathy* erroneously to phenomena which are now believed to have been the result of the homœopathic law?

Some of the statements in the above obituary remind us of a Spanish proverb: "A wise man changeth his mind, but a fool never does." The laudation which is sometimes bestowed upon men on account of firmness in adherence to doctrines they may have once promulgated, however false, is inconsistent with the age in which we live; especially is it so, with the art of medicine of this period. The "novel views and therapeutic eccentricities" of Dr. Gross placed him, we think, a little nearer to the true art of medicine than perhaps any one his colleagues either in Europe or in this country; and that which the *British Journal* now regards "the chaff" may prove to be the "good seed."

The Fifth Anniversary session of the American Institute of Homœopathy will be held in this city, at the Society Library, No. 346 Broadway, on the second Wednesday of June inst., at 10 o'clock, A. M.

The Committee of the American Institute of Homœopathy on Elections, will meet on Tuesday, June 13th, at 4 o'clock, P. M., at the Homœopathic Dispensary, 57 Bond street, in the city of New York. Candidates for membership of the Institute are requested to meet the Committee at that time and place.

Several articles which we had prepared for this number of the Journal have been left out to make room for the valuable paper from the "*British Journal of Homœopathy*." The numbers for January and April of that Journal were received a few days ago.

The spread of sound principles in medicine, in England and other parts of Europe, is of the most encouraging character to the friends of Homœopathy.